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Notice of Intent (NOI) for Stormwater Discharges from Large and Small Construction Activities, NPDES General Permit

DHEC-OCRM
CHARLESTON OFFICE

For official use only

File number: 07-08-12-01

Permit number: SCR10 6209

Submittal package complete: 12/5/08

Public Notice Start Date (OCRM only): 12-12-08

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Submission of an NOI constitutes notice that the entity identified in Section I intends to be authorized under SCR100000. Instructions on page 5.

Date: 11/18/2008

Project/ Site Name: Buckwalter Plaza

County: Beaufort

Do you want this project to be considered for the Expedited Review Program (ERP)? ☐ Yes ☒ No (See instructions.)
If yes, is the design of this project above regulatory requirements or Low Impact Development? ☐ Yes ☐ No

I. Project Information

Project Owner/ Operator (Company or person): Paul Steadman

Company EIN: _____

Phone: 704 575 2729 Fax: 803 547 9521

Mailing Address: 5064 Crofton Drive

City: Fort Mill

State: SC

Zip: 29715

Permit Contact (if owner is company): _____

Phone: _____

Mailing Address: _____

City: _____

State: _____

Zip: _____

Email address (optional): _____

II. Property Information

A. Site Location (street address, nearest intersection, etc.): Buckwalter Parkway north of Parkside Drive

City/ Town (if in limits): Bluffton

Latitude: 32° 16' 59" N Longitude: -80° 54' 39" W

Tax map # (list all): R610 022 000 1072 0000

B. Property Owner: Paul Steadman

Phone: _____

Mailing Address: 5064 Crofton Drive

City: Fort Mill

State: SC

Zip: 29715

III. Site Information

A. Disturbed area (to the nearest tenth of an acre): 10.7 acres Total area: 13.1 acres

B. Is this project part of a Larger Common Plan for Development or Sale (LCP)? ☐ Yes ☒ No

LCP/ Overall Development Name: _____

Check here if this is the first phase. ☐

Previous state permit/ file number: _____

Previous NPDES coverage number: SCR10 ☐ ☐ ☐ ☐

C. Start Date (MM/DD/YYYY): 02/01/2009

Completion Date: 06/01/2009

D. Is this site located on Indian Lands? ☐ Yes ☒ No

If yes, name of reservation: _____

E. Type of Activity (check one):

☒ Commercial

☐ Industrial

☐ Institutional

☐ Residential: Single-family

☐ Multi-use (Commercial & Residential)

☐ Other:

☐ Linear

☐ Residential: Multi-family

☐ Site Preparation (No new impervious)

F. Are there any flooding problems downstream of or adjacent to this site? ☐ Yes ☒ No

G. Has S.C. DHEC issued a Notice to Comply or Notice of Violation for this site or LCP? ☐ Yes ☒ No

H. Is any part of the property located inside an MS4 or urbanized area? ☐ Yes ☒ No

If yes, list the MS4 operator or urbanized area name: _____

I. List all state and federal environmental permits or approvals applied for or obtained for this site (e.g., RCRA). _____

IV. Waterbody Information

A. Nearest receiving waterbody(s) [RWB]: Okatie River

Distance to nearest RWB (feet): 2,535

Classification of nearest RWB: ORW

Next/Nearest named RWB: Colleton River

B. 1. Waters of the U.S./ State	On the site?	Delineated/ Identified?	Impacts?	Amount of impacts
a. Jurisdictional wetlands	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac
b. Non-jurisdictional wetlands	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>0.060</u> Ac
c. Other Water(s) List:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Ac _____ Feet

2. If yes for impacts in B.1, describe each impact and activity, and list all permits (e.g., USACOE Nationwide permit, DHEC General Permit) and certifications that have been applied for or obtained for each impact.

0.06 acres will be filled

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C. Impaired Waterbodies (See instructions.)

List the nearest DHEC water quality monitoring station(s) [WQMS(s)] to which construction stormwater (SW) discharges will drain and the corresponding waterbody(s). MD-176 Waterbody(s) will drain to:

1. Is this WQMS(s) listed on the most current 303(d) List for Impaired Waters? ☒ Yes ☐ No
 - a. If yes for 1, list the impairment(s). Aquatic Life Use
 - b. If yes for 1, will the site's construction SW discharges contain any pollutant(s) causing the impairment(s)? ☐ Yes ☒ No
 - c. If yes for b, list the impairment(s) affected by the pollutant(s) referenced in b. _____
 - d. If yes for b, will use of the proposed BMPs ensure that the site's discharges will not contribute to or cause further water quality standard violations for the impairment(s) listed in c? ☐ Yes ☐ No
2. Has a TMDL(s) been developed for this WQMS(s)? ☐ Yes ☒ No
 - a. If yes for 2, list the impairment(s). _____
 - b. If yes for 2, has the standard been attained for all impairment(s)? ☐ Yes ☐ No
 - c. If no for b, will the site's construction SW discharges contain any pollutant(s) causing the impairment(s)? ☐ Yes ☐ No
 - d. If yes for c, are your discharges consistent with the assumptions and requirements of the TMDL(s)? ☐ Yes ☐ No

D. 1. Are S.C. Navigable Waters (SCNW) on the site? ☐ Yes ☒ No

- a. If yes for 1, list the name of the SCNW: _____
- b. If yes for 1, will any construction activities cross over or occur in, under, or through the SCNW? ☐ Yes ☐ No
- c. If yes for b, then describe activities. _____
- d. If yes for b, are the activities in SCNW covered under a DHEC General Permit or other DHEC permit? ☐ Yes ☐ No
- e. If no for d, has an SCNW permit been applied for or issued for the site? ☐ Yes, for all activities ☐ Yes, for some activities ☐ No
- f. If yes for d or e, list permit number(s) and corresponding activities. _____

V. Operator Information

- A. SWPPP Preparer: Robert Oetting S.C. Registration #: 26398
 Company/ Firm: WK Dickson S.C. COA #: 00177
 Mailing Address: 17 Park of Commerce Blvd., Suite 201 City: Savannah State: GA Zip: 31405
 Phone: (Day) 912-353-8800 (Mobile) _____ (Fax) 912-233-1172
 Email address (optional): roetting@wkdickson.com
- B. Operator of Day-to-Day Site Activities [ODSA] (Company or person): _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 Site Contact (if ODSA is company): _____ Phone: _____

VI. Signatures and Certifications: DO NOT SIGN IN BLACK INK!

- A. One copy of the SWPPP, all specifications and supporting calculations, forms, and reports are herewith submitted and made a part of this application. I have placed my signature and seal on the design documents submitted signifying that I accept responsibility for the design of the system. Further, I certify to the best of my knowledge and belief that the design is consistent with the requirements of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as amended, pursuant to Regulation 72-300 et seq., and in accordance with the terms and conditions of SCR100000. (This should be person identified in Section V.A.)
 Check one: ☒ Engineer ☐ Tier B Surveyor ☐ Landscape Architect

Robert Oetting
Printed name of SWPPP Preparer


Signature of SWPPP Preparer

26398
S.C. Registration #

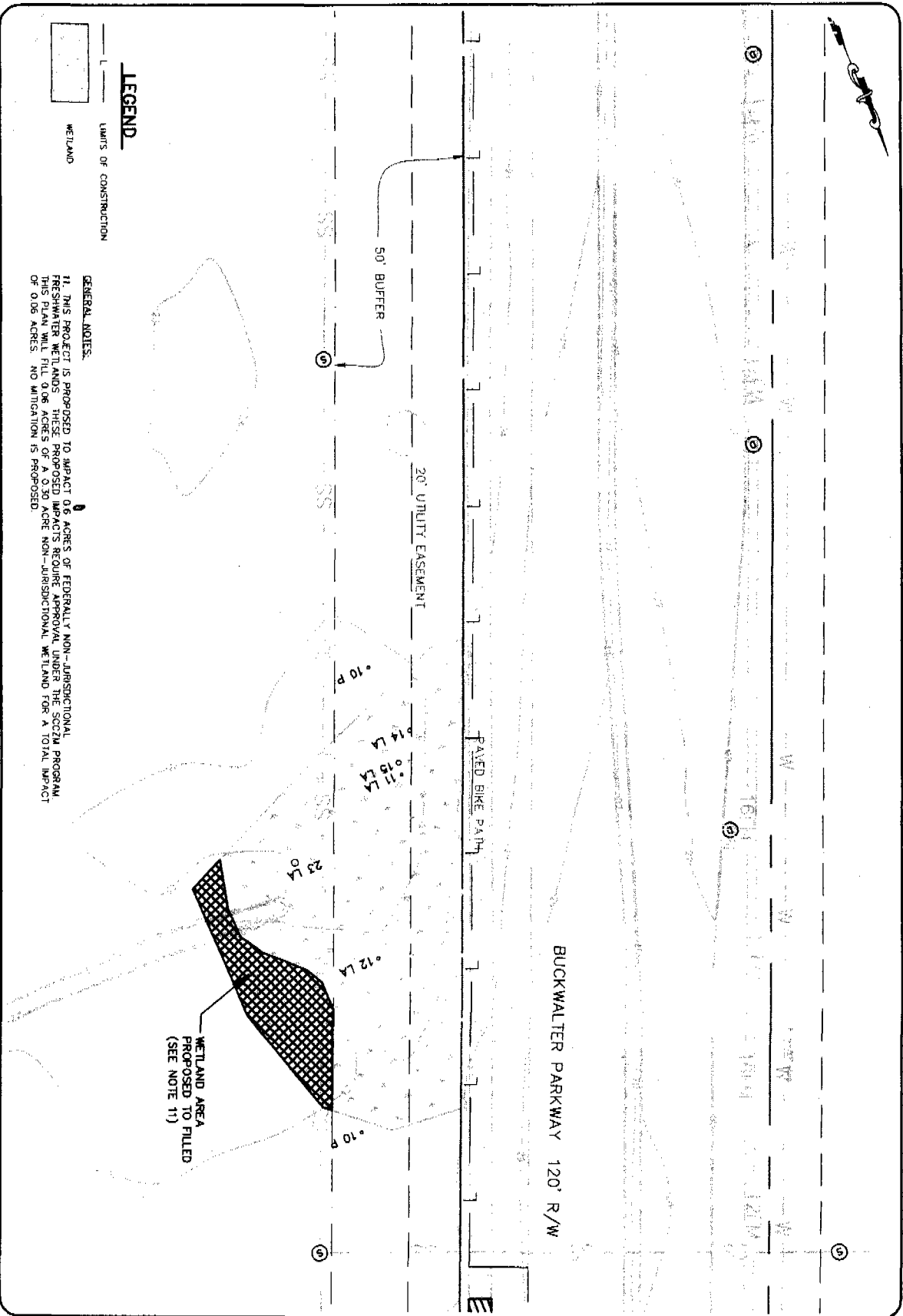
- B. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I hereby certify that all land-disturbing construction and associated activity pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans and SCR100000. I also certify that a responsible person will be assigned to the project for day-to-day control. I hereby grant authorization to the to S.C. Department of Health and Environmental Control (DHEC) and/or the local implementing agency the right of access to the site at all times for the purpose of on site inspections during the course of construction and to perform maintenance inspections following the completion of the land-disturbing activity. (See Section 122.22 of S.C. Reg. 61-9 for signatory authority information.)

Paul R. Steadman
Printed name of Project Owner/Operator


Signature of Project Owner/ Operator

11-19-08
Date



LEGEND

LIMITS OF CONSTRUCTION

WETLAND

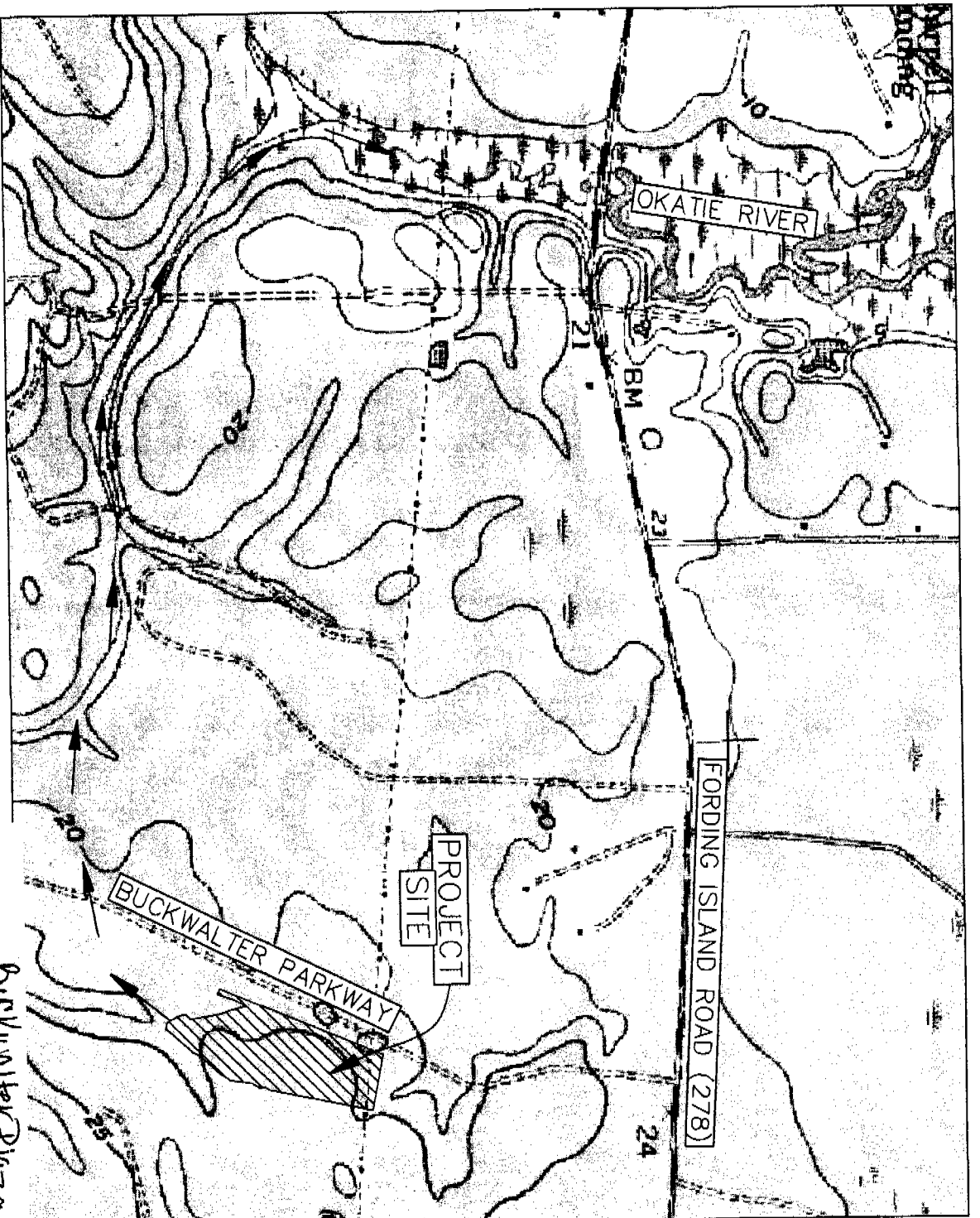
GENERAL NOTES:

11. THIS PROJECT IS PROPOSED TO IMPACT 0.6 ACRES OF FEDERALLY NON-JURISDICTIONAL FRESHWATER WETLANDS. THESE PROPOSED IMPACTS REQUIRE APPROVAL UNDER THE SC22M PROGRAM. THIS PLAN WILL FILL 0.06 ACRES OF A 0.30 ACRE NON-JURISDICTIONAL WETLAND FOR A TOTAL IMPACT OF 0.06 ACRES. NO MITIGATION IS PROPOSED.

PROJECT NUMBER	17-20
DATE	1-20
BY	SAVANNAH, GA 31403
DATE	(815) 253-1800
PROJECT NUMBER	17-20
DATE	1-20
BY	SAVANNAH, GA 31403
DATE	(815) 253-1800
PROJECT NUMBER	17-20
DATE	1-20
BY	SAVANNAH, GA 31403
DATE	(815) 253-1800

17 PAGE OF CONSTRUCTION	DATE 201
SAVANNAH, GA 31403	(815) 253-1800
Office Location	Field
South Carolina	Georgia
WETLAND IMPACT	

BUCKWALTER PLAZA
PAUL STEADMAN
BUFTON, BEAUFORT COUNTY, SOUTH CAROLINA
WETLAND IMPACT



USGS QUAD MAP

BUCKWALTER PLAZA

SCALE 1" = 1000'

Quad Name Buckwalter Plaza Eris # 07-08-12-01

Project Name Buckwalter Plaza

Staff Initial OK Project Type Commercial

TMS# Field 022 000 1072 0000